

FEB 29 2012

BY: BDA

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION  
A PUBLIC DOCUMENT

**STATEMENT OF ECONOMIC INTERESTS**

RECEIVED  
FAIR POLITICAL PRACTICES COMMISSION  
COVER PAGE



Please type or print in ink.

NAME OF FILER

(LAST)

2012 FEB 29 PM 3:50  
FIONA

(FIRST)

(MIDDLE)

MA

SARAH

**1. Office, Agency, or Court**

Agency Name

STATE LEGISLATURE

Division, Board, Department, District, if applicable

STATE ASSEMBLY

Your Position

ASSEMBLYMEMBER

► If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_

Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**

☒ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County \_\_\_\_\_

☐ County of \_\_\_\_\_

☐ City of \_\_\_\_\_

☐ Other \_\_\_\_\_

**3. Type of Statement (Check at least one box)**

☒ Annual: The period covered is January 1, 2011, through December 31, 2011.

☐ Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2011.

☐ The period covered is January 1, 2011, through the date of leaving office.

☐ Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

☐ Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_

**4. Schedule Summary**

Check applicable schedules or "None."

► Total number of pages including this cover page: 11

☒ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☒ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this  
I certify under penalty of perjury under the laws of the State of California t

Date Signed 2/27/12  
(month, day, year)

Signature

# SCHEDULE A-1

## Investments

### Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

Fiona Ma

<p>▶ NAME OF BUSINESS ENTITY <u>Aetna</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Health Insurance Provider</u></p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000      <input checked="" type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000         </p> <p>NATURE OF INVESTMENT  <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____  <small>(Describe)</small>  <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>      </u> / <u>      </u> / <u>11</u>      <u>4</u> / <u>11</u> / <u>11</u>            ACQUIRED                      DISPOSED         </p>	<p>▶ NAME OF BUSINESS ENTITY</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000         </p> <p>NATURE OF INVESTMENT  <input type="checkbox"/> Stock      <input type="checkbox"/> Other _____  <small>(Describe)</small>  <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>      </u> / <u>      </u> / <u>11</u>      <u>      </u> / <u>      </u> / <u>11</u>            ACQUIRED                      DISPOSED         </p>
<p>▶ NAME OF BUSINESS ENTITY <u>EEM</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Exchange Traded Fund</u></p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000      <input checked="" type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000         </p> <p>NATURE OF INVESTMENT  <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____  <small>(Describe)</small>  <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>      </u> / <u>      </u> / <u>11</u>      <u>      </u> / <u>      </u> / <u>11</u>            ACQUIRED                      DISPOSED         </p>	<p>▶ NAME OF BUSINESS ENTITY</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000         </p> <p>NATURE OF INVESTMENT  <input type="checkbox"/> Stock      <input type="checkbox"/> Other _____  <small>(Describe)</small>  <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>      </u> / <u>      </u> / <u>11</u>      <u>      </u> / <u>      </u> / <u>11</u>            ACQUIRED                      DISPOSED         </p>
<p>▶ NAME OF BUSINESS ENTITY <u>XLE</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Exchange Traded Fund</u></p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000      <input checked="" type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000         </p> <p>NATURE OF INVESTMENT  <input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____  <small>(Describe)</small>  <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>4</u> / <u>13</u> / <u>11</u>      <u>      </u> / <u>      </u> / <u>11</u>            ACQUIRED                      DISPOSED         </p>	<p>▶ NAME OF BUSINESS ENTITY</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</p> <p>FAIR MARKET VALUE  <input type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000  <input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000         </p> <p>NATURE OF INVESTMENT  <input type="checkbox"/> Stock      <input type="checkbox"/> Other _____  <small>(Describe)</small>  <input type="checkbox"/> Partnership    <input type="radio"/> Income Received of \$0 - \$499  <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)         </p> <p>IF APPLICABLE, LIST DATE:  <u>      </u> / <u>      </u> / <u>11</u>      <u>      </u> / <u>      </u> / <u>11</u>            ACQUIRED                      DISPOSED         </p>

Comments:

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <b>FIONA MA</b>

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

99 People, Inc.

ADDRESS (Business Address Acceptable)

1181 Chess Drive, Ste 200, Foster City, CA 94404

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Chinese Web Media

YOUR BUSINESS POSITION

Consultant

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☒ Salary      ☐ Spouse's or registered domestic partner's income

☐ Loan repayment      ☐ Partnership

☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

☐ Commission or      ☐ Rental Income, list each source of \$10,000 or more

☐ Other \_\_\_\_\_  
(Describe)

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary      ☐ Spouse's or registered domestic partner's income

☐ Loan repayment      ☐ Partnership

☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

☐ Commission or      ☐ Rental Income, list each source of \$10,000 or more

☐ Other \_\_\_\_\_  
(Describe)

► **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000  
☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000  
☐ OVER \$100,000

INTEREST RATE

\_\_\_\_\_%

☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None      ☐ Personal residence

☐ Real Property \_\_\_\_\_  
Street address

City

☐ Guarantor \_\_\_\_\_

☐ Other \_\_\_\_\_  
(Describe)

Comments: \_\_\_\_\_

**SCHEDULE E**  
**Income – Gifts**  
**Travel Payments, Advances,**  
**and Reimbursements**

<b>CALIFORNIA FORM 700</b> <b>FAIR POLITICAL PRACTICES COMMISSION</b>
Name  FIONA MA

- You must mark either the gift or income box.
- Mark the 501(c)(3) box for a travel payment received from a nonprofit 501(c)(3) organization. These payments are not subject to the \$420 gift limit, but may result in a disqualifying conflict of interest.

<p>▶ NAME OF SOURCE <u>National Conference of State Legislatures</u></p> <p>ADDRESS (Business Address Acceptable) <u>444 N Capitol St., NW # 515</u></p> <p>CITY AND STATE <u>Washington, DC 20001</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input checked="" type="checkbox"/> 501 (c)(3) <u>Bipartisan political education organization</u></p> <p>DATE(S): <u>2 / 16 / 11 - 2 / 18 / 11</u> AMT: \$ <u>347.40</u> (If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p><input checked="" type="checkbox"/> Made a Speech/Participated in a Panel <input type="checkbox"/> Other - Provide Description <u>Travel. Ms. Ma serves on Board of Directors</u></p>	<p>▶ NAME OF SOURCE <u>CA Foundation on Environment &amp; Economy</u></p> <p>ADDRESS (Business Address Acceptable) <u>Pier 35, Ste 202</u></p> <p>CITY AND STATE <u>San Francisco, CA 94133</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input checked="" type="checkbox"/> 501 (c)(3) <u>Environmental research/education organization</u></p> <p>DATE(S): <u>4 / 14 / 11 - 4 / 23 / 11</u> AMT: \$ <u>3,563.71</u> (If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p><input type="checkbox"/> Made a Speech/Participated in a Panel <input checked="" type="checkbox"/> Other - Provide Description <u>Travel/Accommodations/Meals. Environmental fact finding trip, meeting with UK environmental experts</u></p>
<p>▶ NAME OF SOURCE <u>US Pan Asian American Chamber of Commerce</u></p> <p>ADDRESS (Business Address Acceptable) <u>1329 18th St., NW</u></p> <p>CITY AND STATE <u>Washington, DC 20036</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input checked="" type="checkbox"/> 501 (c)(3) <u>Asian/American business/education organization</u></p> <p>DATE(S): <u>5 / 24 / 11 - 5 / 25 / 11</u> AMT: \$ <u>548.40</u> (If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p><input checked="" type="checkbox"/> Made a Speech/Participated in a Panel <input type="checkbox"/> Other - Provide Description <u>Travel/Accommodations/Meals. Tickets to dinner where she was guest speaker/award presenter</u></p>	<p>▶ NAME OF SOURCE <u>Women In Government</u></p> <p>ADDRESS (Business Address Acceptable) <u>1319 F St, NW # 710</u></p> <p>CITY AND STATE <u>Washington, DC 20004</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input checked="" type="checkbox"/> 501 (c)(3) <u>Nonpartisan legislative education for women electeds</u></p> <p>DATE(S): <u>6 / 16 / 11 - 6 / 18 / 11</u> AMT: \$ <u>1,648.78</u> (If gift)</p> <p>TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p><input checked="" type="checkbox"/> Made a Speech/Participated in a Panel <input type="checkbox"/> Other - Provide Description <u>Travel/Accommodations/Meals. Ms Ma serves on Board of Directors. Guest speaker/panelist</u></p>

Comments: \_\_\_\_\_

**SCHEDULE E**  
**Income – Gifts**  
**Travel Payments, Advances,**  
**and Reimbursements**

<b>CALIFORNIA FORM 700</b> <b>FAIR POLITICAL PRACTICES COMMISSION</b>
Name <b>FIONA MA</b>

- You must mark either the gift or income box.
- Mark the 501(c)(3) box for a travel payment received from a nonprofit 501(c)(3) organization. These payments are not subject to the \$420 gift limit, but may result in a disqualifying conflict of interest.

▶ NAME OF SOURCE	
CA Council for Environment & Economic Balance	
ADDRESS (Business Address Acceptable)	
100 Spear St, # 805	
CITY AND STATE	
San Francisco, CA 94105	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input checked="" type="checkbox"/> 501 (c)(3)
Environmental Education	
DATE(S): 7 / 10 / 11 - 7 / 11 / 11	AMT: \$ 394.00
(If gift)	
TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income	
<input checked="" type="checkbox"/> Made a Speech/Participated in a Panel	
<input type="checkbox"/> Other - Provide Description	
Accommodations/Meals	

▶ NAME OF SOURCE	
National Conference of State Legislatures	
ADDRESS (Business Address Acceptable)	
444 N Capitol St., NW # 515	
CITY AND STATE	
Washington, DC 20001	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input checked="" type="checkbox"/> 501 (c)(3)
Bi partisan political education organization	
DATE(S): 8 / 7 / 11 - 8 / 10 / 11	AMT: \$ 356.76
(If gift)	
TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income	
<input checked="" type="checkbox"/> Made a Speech/Participated in a Panel	
<input type="checkbox"/> Other - Provide Description	
Travel. Ms Ma is on Board of Directors	

▶ NAME OF SOURCE	
CA Correctional Peace Officers Association	
ADDRESS (Business Address Acceptable)	
755 River Point Dr	
CITY AND STATE	
West Sacramento, CA 95605	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input type="checkbox"/> 501 (c)(3)
Correctional Peace Officers Association	
DATE(S): 7 / 25 / 11 - 7 / 26 / 11	AMT: \$ 730.00
(If gift)	
TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income	
<input checked="" type="checkbox"/> Made a Speech/Participated in a Panel	
<input type="checkbox"/> Other - Provide Description	
Accommodation/Meals. Ms. Ma was a panelist & speaker at the Governors Cup Foundation event	

▶ NAME OF SOURCE	
Aspen Institute Rodel	
ADDRESS (Business Address Acceptable)	
One Dupont Circle NW # 700	
CITY AND STATE	
Washington DC 20036	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input checked="" type="checkbox"/> 501 (c)(3)
Bi partisan education foundation for electeds	
DATE(S): 12 / 8 / 11 - 12 / 12 / 11	AMT: \$ 3,074.60
(If gift)	
TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income	
<input checked="" type="checkbox"/> Made a Speech/Participated in a Panel	
<input type="checkbox"/> Other - Provide Description	
Travel/Accommodations/Meals. Ms. Ma is a Aspen Rodel Fellow	

Comments: \_\_\_\_\_

**SCHEDULE E**  
**Income – Gifts**  
**Travel Payments, Advances,**  
**and Reimbursements**

<b>CALIFORNIA FORM 700</b> <b>FAIR POLITICAL PRACTICES COMMISSION</b>
Name FIONA MA

- You must mark either the gift or income box.
- Mark the 501(c)(3) box for a travel payment received from a nonprofit 501(c)(3) organization. These payments are not subject to the \$420 gift limit, but may result in a disqualifying conflict of interest.

▶ NAME OF SOURCE Women In Government	
ADDRESS (Business Address Acceptable) 1319 F St., NW # 710	
CITY AND STATE Washington, DC 20004	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input checked="" type="checkbox"/> 501 (c)(3)
Non-partisan legislative education for women electeds	
DATE(S): 1 / 6 / 11 - 1 / 8 / 11	AMT: \$ 1,058.41
(If gift)	
TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income	
<input checked="" type="checkbox"/> Made a Speech/Participated in a Panel	
<input type="checkbox"/> Other - Provide Description	
Travel. Ms. Ma is on Board of Directors	

▶ NAME OF SOURCE	
ADDRESS (Business Address Acceptable)	
CITY AND STATE	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input type="checkbox"/> 501 (c)(3)
DATE(S): ____ / ____ / ____ - ____ / ____ / ____	
(If gift)	
AMT: \$	
TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income	
<input type="checkbox"/> Made a Speech/Participated in a Panel	
<input type="checkbox"/> Other - Provide Description	

▶ NAME OF SOURCE	
ADDRESS (Business Address Acceptable)	
CITY AND STATE	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input type="checkbox"/> 501 (c)(3)
DATE(S): ____ / ____ / ____ - ____ / ____ / ____	
(If gift)	
AMT: \$	
TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income	
<input type="checkbox"/> Made a Speech/Participated in a Panel	
<input type="checkbox"/> Other - Provide Description	

▶ NAME OF SOURCE	
ADDRESS (Business Address Acceptable)	
CITY AND STATE	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	<input type="checkbox"/> 501 (c)(3)
DATE(S): ____ / ____ / ____ - ____ / ____ / ____	
(If gift)	
AMT: \$	
TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income	
<input type="checkbox"/> Made a Speech/Participated in a Panel	
<input type="checkbox"/> Other - Provide Description	

Comments: \_\_\_\_\_

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name <b>FIONA MA</b>
--

► NAME OF SOURCE  
California Democratic Party

ADDRESS (Business Address Acceptable)  
1401 21st St., # 200, Sacramento, CA 95811

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Political organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
2 / 8 / 11	\$ 117.09	Dinner
2 / 8 / 11	\$ 10.00	Beverages
5 / 11 / 11	\$ 40.00	Reception

► NAME OF SOURCE  
CA Foundation on Environment & Economy (CFEE)

ADDRESS (Business Address Acceptable)  
Pier 35, # 202, San Francisco, CA 94133

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Environmental Research/Education

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
3 / 17 / 11	\$ 73.00	Dinner
/ /	\$	
/ /	\$	

► NAME OF SOURCE  
Global Automakers

ADDRESS (Business Address Acceptable)  
1050 K St., NW, # 650, Washington, DC 20001

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Automakers Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5 / 16 / 11	\$ 102.70	Dinner
/ /	\$	
/ /	\$	

► NAME OF SOURCE  
Asian American Education Institute

ADDRESS (Business Address Acceptable)  
PO Box 188858, Sacramento, CA 95818

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Educational Institute

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4 / 12 / 11	\$ 55.08	Dinner
6 / 7 / 11	\$ 48.19	Breakfast
/ /	\$	

► NAME OF SOURCE  
CA Citrus Mutual

ADDRESS (Business Address Acceptable)  
512 North Kaweah Ave, Exeter, CA 93221

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Agricultural organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4 / 26 / 11	\$ 78.95	Dinner
1 / 11 / 11	\$ 3.00	Bag of Citrus
/ /	\$	

► NAME OF SOURCE  
Apple Inc

ADDRESS (Business Address Acceptable)  
1 Infinite Loop, Cupertino, CA 95014

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Consumer Products Specialities

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
5 / 31 / 11	\$ 200.00	Dinner
/ /	\$	
/ /	\$	

Comments: \_\_\_\_\_

# SCHEDULE D

## Income - Gifts

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

FIONA MA

► NAME OF SOURCE

NCSL FOUNDATION

ADDRESS (Business Address Acceptable)

7700 EAST FIRST PL, DENVER, CO 80230

BUSINESS ACTIVITY, IF ANY, OF SOURCE

NATIONAL COUNCIL OF STATE LEADERS

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
8 / 9 / 11	\$ 131.65	DINNER
/  /	\$	
/  /	\$	

► NAME OF SOURCE

CA GRAPE & TREE FRUIT LEAGUE

ADDRESS (Business Address Acceptable)

978 W ALLUVIAL, STE 107, FRESNO, CA 93711

BUSINESS ACTIVITY, IF ANY, OF SOURCE

GROWERS ASSOCIATION

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 1 / 11	\$ 113.86	MEAL EXPENSES
8 / 1 / 11	\$ 10.00	LUNCH BOX TIN
11 / 1 / 11	\$ 6.00	BAG OF GRAPES

► NAME OF SOURCE

CA RICE COMMISSION 95816

ADDRESS (Business Address Acceptable)

8801 FOLSOM BLVD STE172, SAC., CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

GROWERS COMMISSION

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
3 / 15 / 11	\$ 54.30	DINNER
/  /	\$	
/  /	\$	

► NAME OF SOURCE

HILLS HOTEL

ADDRESS (Business Address Acceptable)

25205 LA PAZ RD, LAGUNA HILLS, CA 92653

BUSINESS ACTIVITY, IF ANY, OF SOURCE

HOTEL

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
8 / 10 / 11	\$ 129.00	ROOM
/  /	\$	
/  /	\$	

► NAME OF SOURCE

CA FORESTRY ASSOCIATION

ADDRESS (Business Address Acceptable)

1215 K ST, STE 1830, SACRAMENTO, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

FORESTRY ASSOCIATION

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
3 / 8 / 11	\$ 64.11	DINNER
/  /	\$	
/  /	\$	

► NAME OF SOURCE

CA COTTON GROWERS ASSOCIATION

ADDRESS (Business Address Acceptable)

1785 N FINE AVE, FRESNO, CA 93727

BUSINESS ACTIVITY, IF ANY, OF SOURCE

GROWERS ASSOCIATION

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
9 / 11 / 22	\$ 229.74	DINNER
11 / 2 / 11	\$ 45.00	COTTON TOWEL SET
/  /	\$	

Comments: \_\_\_\_\_



# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <u>FIONA MA</u>

<p>► NAME OF SOURCE <u>Nicholas Hardeman</u></p> <p>ADDRESS (Business Address Acceptable) <u>808 Sinter Lane, West Sacramento, Ca 95691</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Friend</u></p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>11 / 12 / 11</u></td> <td><u>\$ 178.90</u></td> <td><u>Wedding Gift</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>11 / 12 / 11</u>	<u>\$ 178.90</u>	<u>Wedding Gift</u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<p>► NAME OF SOURCE <u>Lydia Fong</u></p> <p>ADDRESS (Business Address Acceptable) <u>130 San Felipe Ave, San Francisco, CA 94127</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Friend</u></p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>11 / 12 / 11</u></td> <td><u>\$ 250.00</u></td> <td><u>Wedding Gift</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>11 / 12 / 11</u>	<u>\$ 250.00</u>	<u>Wedding Gift</u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
<u>11 / 12 / 11</u>	<u>\$ 178.90</u>	<u>Wedding Gift</u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
<u>11 / 12 / 11</u>	<u>\$ 250.00</u>	<u>Wedding Gift</u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
<p>► NAME OF SOURCE <u>Stephanie Shuster</u></p> <p>ADDRESS (Business Address Acceptable) <u>3521 Selwyn Ave, Charlotte, NC 28209</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Friend</u></p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>11 / 12 / 11</u></td> <td><u>\$ 100.00</u></td> <td><u>Wedding Gift</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>11 / 12 / 11</u>	<u>\$ 100.00</u>	<u>Wedding Gift</u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<p>► NAME OF SOURCE <u>Samson Wong</u></p> <p>ADDRESS (Business Address Acceptable) <u>1851 11th Ave, San Francisco, CA 94122</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Friend</u></p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>11 / 12 / 11</u></td> <td><u>\$ 100.00</u></td> <td><u>Wedding Gift</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>11 / 12 / 11</u>	<u>\$ 100.00</u>	<u>Wedding Gift</u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
<u>11 / 12 / 11</u>	<u>\$ 100.00</u>	<u>Wedding Gift</u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
<u>11 / 12 / 11</u>	<u>\$ 100.00</u>	<u>Wedding Gift</u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
<p>► NAME OF SOURCE <u>Bei Qin</u></p> <p>ADDRESS (Business Address Acceptable) <u>20065 Stevens Creek Blvd, BIC St1C, Cupertino, CA</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Friend</u></p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>11 / 12 / 11</u></td> <td><u>\$ 125.00</u></td> <td><u>Wedding Gift</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>11 / 12 / 11</u>	<u>\$ 125.00</u>	<u>Wedding Gift</u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<p>► NAME OF SOURCE <u>David Jakopin/Jia Li</u></p> <p>ADDRESS (Business Address Acceptable) <u>230 Exeter Ave, San Carlos, CA 94070</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Friend</u></p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>11 / 12 / 11</u></td> <td><u>\$ 250.00</u></td> <td><u>Wedding Gift</u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u>  /  /  </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>11 / 12 / 11</u>	<u>\$ 250.00</u>	<u>Wedding Gift</u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>	<u>  /  /  </u>	<u>\$</u>	<u> </u>
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
<u>11 / 12 / 11</u>	<u>\$ 125.00</u>	<u>Wedding Gift</u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)																							
<u>11 / 12 / 11</u>	<u>\$ 250.00</u>	<u>Wedding Gift</u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							
<u>  /  /  </u>	<u>\$</u>	<u> </u>																							

Comments: \_\_\_\_\_

# SCHEDULE D Income – Gifts

Name

FIONA MA

► NAME OF SOURCE

Law Offices of Green & Green

ADDRESS (Business Address Acceptable)

1000 Fourth St, Ste 875, San Rafael, CA 94901

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Friends

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 12 / 11	\$ 100.00	Wedding Gift
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE

Jakshi & Viraj Bharwad

ADDRESS (Business Address Acceptable)

10511 Madera Dr, Curpertino, CA 95014

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Friends

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 12 / 11	\$ 100.00	Wedding Gift
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE

Chong Park

ADDRESS (Business Address Acceptable)

1025 Filmore St., # 12E, San Francisco, Ca 94115

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Friend

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 12 / 11	\$ 100.00	Wedding Gift
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE

Leonid & Larisa Neymark

ADDRESS (Business Address Acceptable)

810 Gonzalez Dr., 8H, San Francisco, CA 94132

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Friends

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 12 / 11	\$ 100.00	Wedding Gift
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE

Li Quin Liu & Ning-Yuan Chang

ADDRESS (Business Address Acceptable)

5212 Silver Acies Crt, San Jose, CA 95138

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Friends

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 12 / 11	\$ 125.00	Wedding Gift
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE

Frankie Legoski

ADDRESS (Business Address Acceptable)

5626 Sara Dr., Torrance, CA 90503

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Friends

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 12 / 11	\$ 100.00	Wedding Gift
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: \_\_\_\_\_

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b>	
FAIR POLITICAL PRACTICES COMMISSION	
Name	<b>FIONA MA</b>

► NAME OF SOURCE  
Toy Industry Association

ADDRESS (Business Address Acceptable)  
1115 Broadway, # 400, New York, NY 10010

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Toy Business Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>6 / 7 / 11</u>	<u>\$ 133.00</u>	<u>Dinner</u>
<u>6 / 8 / 11</u>	<u>\$ 4.00</u>	<u>Gift Bag</u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE  
Irene Cardenas

ADDRESS (Business Address Acceptable)  
8700 Kenshire Way Sacramento, CA 95828

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Friend

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>3 / 25 / 11</u>	<u>\$ 135.31</u>	<u>Birthday Gift/necklace</u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>
<u>  /  /  </u>	<u>\$</u>	<u> </u>

Comments: \_\_\_\_\_